

ARIZONA CORPORATION COMMISSION
UTILITIES DIVISION

ANNUAL REPORT MAILING LABEL – MAKE CHANGES AS NECESSARY

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W-02065A
Wilhoit Water Company, Inc.
PO Box 870
Clarkdale, AZ 85324

RECEIVED

ACC UTILITIES DIRECTOR

ANNUAL REPORT
Water

FOR YEAR ENDING

12	31	2009
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FOR COMMISSION USE

ANN 04	09
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4-26-10

COMPANY INFORMATION

Company Name (Business Name) <u>Willnot Water Co, Inc</u>			
Mailing Address <u>PO Box 870</u>			
<u>Clarkdale</u> (City)	<u>Az</u> (State)	<u>86324</u> (Zip)	
<u>(928) 639-1308</u> Telephone No. (Include Area Code)		<u>(928) 634-8512</u> Fax No. (Include Area Code)	
Cell No. (Include Area Code)			
Email Address			
Local Office Mailing Address <u>PO Box 870</u>			
<u>Clarkdale</u> (City)	<u>Az</u> (State)	<u>86324</u> (Zip)	
<u>Same</u>			
<u>Local Office Telephone No. (Include Area Code)</u>		<u>Fax No. (Include Area Code)</u>	
<u>Cell No. (Include Area Code)</u>			
Email Address			

MANAGEMENT INFORMATION

<input type="checkbox"/> Regulatory Contact:			
<input checked="" type="checkbox"/> Management Contact: <u>Mami Perkins</u> <u>Bookkeeper</u>			
<u>PO Box 870</u> (Street)	<u>Clarkdale</u> (City)	<u>Az</u> (State)	<u>86324</u> (Zip)
<u>(928) 639-1308</u> Telephone No. (Include Area Code)		<u>(928) 634-8512</u> Fax No. (Include Area Code)	
Cell No. (Include Area Code)			
Email Address			
On Site Manager: _____			
(Name)			
_____ (Street)	_____ (City)	_____ (State)	_____ (Zip)
Telephone No. (Include Area Code)		Fax No. (Include Area Code)	
Cell No. (Include Area Code)			
Email Address			

Statutory Agent: David A Conley, Jr
 (Name)
Po Box 870 Clarkdale Az 86324
 (Street) (City) (State) (Zip)
(928) ~~634-851~~ 639-1308 (928) 634-~~851~~ 8512
 (Telephone No. (Include Area Code)) (Fax No. (Include Area Code)) (Cell No. (Include Area Code))

Attorney: _____
 (Name)

 (Street) (City) (State) (Zip)

 (Telephone No. (Include Area Code)) (Fax No. (Include Area Code)) (Cell No. (Include Area Code))

Email Address _____

OWNERSHIP INFORMATION

Check the following box that applies to your company:

- | | |
|---|--|
| <input type="checkbox"/> Sole Proprietor (S) | <input checked="" type="checkbox"/> C Corporation (C) (Other than Association/Co-op) |
| <input type="checkbox"/> Partnership (P) | <input type="checkbox"/> Subchapter S Corporation (Z) |
| <input type="checkbox"/> Bankruptcy (B) | <input type="checkbox"/> Association/Co-op (A) |
| <input type="checkbox"/> Receivership (R) | <input type="checkbox"/> Limited Liability Company |
| <input type="checkbox"/> Other (Describe) _____ | |

COUNTIES SERVED

Check the box below for the county/ies in which you are certificated to provide service:

- | | | |
|-------------------------------------|---|-----------------------------------|
| <input type="checkbox"/> APACHE | <input type="checkbox"/> COCHISE | <input type="checkbox"/> COCONINO |
| <input type="checkbox"/> GILA | <input type="checkbox"/> GRAHAM | <input type="checkbox"/> GREENLEE |
| <input type="checkbox"/> LA PAZ | <input type="checkbox"/> MARICOPA | <input type="checkbox"/> MOHAVE |
| <input type="checkbox"/> NAVAJO | <input type="checkbox"/> PIMA | <input type="checkbox"/> PINAL |
| <input type="checkbox"/> SANTA CRUZ | <input checked="" type="checkbox"/> YAVAPAI | <input type="checkbox"/> YUMA |
| <input type="checkbox"/> STATEWIDE | | |

COMPANY NAME

Willard Water Co

UTILITY PLANT IN SERVICE

Acct. No.	DESCRIPTION	Original Cost (OC)	Accumulated Depreciation (AD)	O.C.L.D. (OC less AD)
301	Organization			
302	Franchises			
303	Land and Land Rights	15321	0	15321
304	Structures and Improvements	10154	10154	0
307	Wells and Springs	32674	32674	0
311	Pumping Equipment	139542	139542	0
320	Water Treatment Equipment	2906	2906	0
330	Distribution Reservoirs and Standpipes	75462	75462	0
331	Transmission and Distribution Mains	247331	247331	0
333	Services	31225	31225	0
334	Meters and Meter Installations	36554	36554	0
335	Hydrants			
336	Backflow Prevention Devices			
339	Other Plant and Misc. Equipment			
340	Office Furniture and Equipment	5798	5798	0
341	Transportation Equipment			
343	Tools, Shop and Garage Equipment			
344	Laboratory Equipment			
345	Power Operated Equipment			
346	Communication Equipment			
347	Miscellaneous Equipment			
348	Other Tangible Plant	985	985	0
	TOTALS	597952	582631	15321

This amount goes on the Balance Sheet Acct. No. 108

COMPANY NAME

W/1607 Water Co, Inc

CALCULATION OF DEPRECIATION EXPENSE FOR CURRENT YEAR

Acct. No.	DESCRIPTION	Original Cost (1)	Depreciation Percentage (2)	Depreciation Expense (1x2)
301	Organization			
302	Franchises			
303	Land and Land Rights	15321	0	0
304	Structures and Improvements	10154	5%	508
307	Wells and Springs	32674		1634
311	Pumping Equipment	139542		4853
320	Water Treatment Equipment	2906		145
330	Distribution Reservoirs and Standpipes	7546.2		3773
331	Transmission and Distribution Mains	247331		12367
333	Services	31225		1561
334	Meters and Meter Installations	36554		1828
335	Hydrants			
336	Backflow Prevention Devices			
339	Other Plant and Misc. Equipment			
340	Office Furniture and Equipment	5798		290
341	Transportation Equipment			
343	Tools, Shop and Garage Equipment			
344	Laboratory Equipment			
345	Power Operated Equipment			
346	Communication Equipment			
347	Miscellaneous Equipment			
348	Other Tangible Plant	985	✓	49
	TOTALS	597952		27008.

This amount goes on the Comparative Statement of Income and Expense
Acct. No. 403.

✓

COMPANY NAME

Hart Water Co, Inc

BALANCE SHEET

Acct No.		BALANCE AT BEGINNING OF YEAR	BALANCE AT END OF YEAR
	ASSETS		
	CURRENT AND ACCRUED ASSETS		
131	Cash	\$ <1051>	\$ <866>
134	Working Funds		
135	Temporary Cash Investments		
141	Customer Accounts Receivable		
146	Notes/Receivables from Associated Companies	6961	5314
151	Plant Material and Supplies		
162	Prepayments		
174	Miscellaneous Current and Accrued Assets		2071
	TOTAL CURRENT AND ACCRUED ASSETS	\$ 5910	\$ 16519
	FIXED ASSETS		
101	Utility Plant in Service	\$ 597952	\$ 597952
103	Property Held for Future Use		
105	Construction Work in Progress		
108	Accumulated Depreciation -- Utility Plant	<582331>	<582331>
121	Non-Utility Property		
122	Accumulated Depreciation -- Non Utility		
	TOTAL FIXED ASSETS	\$ 15621	\$ 15621
	TOTAL ASSETS	\$ 21531.	\$ 22140

NOTE: The Assets on this page should be equal to **Total Liabilities and Capital** on the following page.

COMPANY NAME

W. Mort Water Co, Inc.

BALANCE SHEET (CONTINUED)

Acct. No.		BALANCE AT BEGINNING OF YEAR	BALANCE AT END OF YEAR
	LIABILITIES		
	CURRENT LIABILITIES		
231	Accounts Payable	\$ 2021	\$
232	Notes Payable (Current Portion)	258044	277589
234	Notes/Accounts Payable to Associated Companies	6000	18451
235	Customer Deposits	4885	4455
236	Accrued Taxes		
237	Accrued Interest		
241	Miscellaneous Current and Accrued Liabilities		
	TOTAL CURRENT LIABILITIES	\$ 270957	\$ 300995
	LONG-TERM DEBT (Over 12 Months)		
224	Long-Term Notes and Bonds	\$	\$
	DEFERRED CREDITS		
251	Unamortized Premium on Debt	\$	\$
252	Advances in Aid of Construction		
255	Accumulated Deferred Investment Tax Credits		
271	Contributions in Aid of Construction		
272	Less: Amortization of Contributions		
281	Accumulated Deferred Income Tax		
	TOTAL DEFERRED CREDITS	\$	\$
	TOTAL LIABILITIES	\$ 270957	\$ 300995
	CAPITAL ACCOUNTS		
201	Common Stock Issued	\$ 100	\$ 100
211	Paid in Capital in Excess of Par Value		
215	Retained Earnings	<126005>	<133760>
218	Proprietary Capital (Sole Props and Partnerships)		
	TOTAL CAPITAL	\$ <125905>	\$
	TOTAL LIABILITIES AND CAPITAL	\$ 145052	\$ <117135>

✓

COMPANY NAME

Wilbert Water Co, Inc

COMPARATIVE STATEMENT OF INCOME AND EXPENSE

Acct. No.	OPERATING REVENUES	PRIOR YEAR	CURRENT YEAR
461	Metered Water Revenue	\$ 100,441	\$ 131,095
460	Unmetered Water Revenue		
474	Other Water Revenues	10,992	330
	TOTAL REVENUES	\$ 111,433	\$ 131,425
	OPERATING EXPENSES		
601	Salaries and Wages	\$ 22,351	\$ 13,293
610	Purchased Water	66,462	67,106
615	Purchased Power	12,108	11,795
618	Chemicals	1,999	106
620	Repairs and Maintenance	39,167	27,023
621	Office Supplies and Expense	7,971	4,833
630	Outside Services		
635	Water Testing	6,175	500.3
641	Rents	7,200	7,200
650	Transportation Expenses		
657	Insurance - General Liability		
659	Insurance - Health and Life	426	
666	Regulatory Commission Expense - Rate Case		
675	Miscellaneous Expense		5556
403	Depreciation Expense	11,357	
408	Taxes Other Than Income		7585
408.11	Property Taxes	4440	7280
409	Income Tax		
	TOTAL OPERATING EXPENSES	\$ 179,656	\$ 156,780
	OPERATING INCOME/(LOSS)	\$ <68,223>	\$ <29,355>
	OTHER INCOME/(EXPENSE)		
419	Interest and Dividend Income	\$	\$
421	Non-Utility Income		2400
426	Miscellaneous Non-Utility Expenses		216
427	Interest Expense		
	TOTAL OTHER INCOME/(EXPENSE)	\$	\$ 2616
	NET INCOME/(LOSS)	\$ <68,223>	\$ <22,739>

COMPANY NAME

Wilbert Water Co, Inc.

SUPPLEMENTAL FINANCIAL DATA**Long-Term Debt**

	LOAN #1	LOAN #2	LOAN #3	LOAN #4
Date Issued				
Source of Loan				
ACC Decision No.				
Reason for Loan				
Dollar Amount Issued	\$	\$	\$	\$
Amount Outstanding	\$	\$	\$	\$
Date of Maturity				
Interest Rate	%	%	%	%
Current Year Interest	\$	\$	\$	\$
Current Year Principle	\$	\$	\$	\$

Meter Deposit Balance at Test Year End

\$

4495-

Meter Deposits Refunded During the Test Year

\$

440-

COMPANY NAME	Williot Water Co, Inc
Name of System:	Yavapai County ADEQ Public Water System Number: 13077

WATER COMPANY PLANT DESCRIPTION

WELLS

ADWR ID Number*	Pump Horsepower	Pump Yield (gpm)	Casing Depth (Feet)	Casing Diameter (Inches)	Meter Size (inches)	Year Drilled
622947	5	20		8"	1.5	
622474	5	35		6"	2	

* Arizona Department of Water Resources Identification Number

OTHER WATER SOURCES

Name or Description	Capacity (gpm)	Gallons Purchased or Obtained (in thousands)
City of Prescott		8,344,980

BOOSTER PUMPS		FIRE HYDRANTS	
Horsepower	Quantity	Quantity Standard	Quantity Other

STORAGE TANKS		PRESSURE TANKS	
Capacity	Quantity	Capacity	Quantity

Note: If you are filing for more than one system, please provide separate sheets for each system.

COMPANY NAME	Willcott Water Co, Inc		
Name of System:	Blue Hills	ADEQ Public Water System Number:	13055

WATER COMPANY PLANT DESCRIPTION

WELLS

ADWR ID Number*	Pump Horsepower	Pump Yield (gpm)	Casing Depth (Feet)	Casing Diameter (Inches)	Meter Size (inches)	Year Drilled
622750	5	50		6"	1.5	
622751	1	10		7"	1.5	

* Arizona Department of Water Resources Identification Number

OTHER WATER SOURCES

Name or Description	Capacity (gpm)	Gallons Purchased or Obtained (in thousands)

BOOSTER PUMPS		FIRE HYDRANTS	
Horsepower	Quantity	Quantity Standard	Quantity Other
21	2		

STORAGE TANKS		PRESSURE TANKS	
Capacity	Quantity	Capacity	Quantity

Note: If you are filing for more than one system, please provide separate sheets for each system.

COMPANY NAME <i>Willcott Water Co, Inc</i>	
Name of System: <i>Thunderbird Meadows</i>	ADEQ Public Water System Number: <i>13096</i>

WATER COMPANY PLANT DESCRIPTION

WELLS

ADWR ID Number*	Pump Horsepower	Pump Yield (gpm)	Casing Depth (Feet)	Casing Diameter (Inches)	Meter Size (inches)	Year Drilled

* Arizona Department of Water Resources Identification Number

OTHER WATER SOURCES

Name or Description	Capacity (gpm)	Gallons Purchased or Obtained (in thousands)
<i>Walden Meadows Community Corp.</i>		<i>5,963,300</i>

BOOSTER PUMPS		FIRE HYDRANTS	
Horsepower	Quantity	Quantity Standard	Quantity Other
	<i>2</i>		

STORAGE TANKS		PRESSURE TANKS	
Capacity	Quantity	Capacity	Quantity

Note: If you are filing for more than one system, please provide separate sheets for each system.

COMPANY NAME	<i>Wilbur Water Co, Inc</i>	
Name of System:	<i>Utopia Estates</i>	ADEQ Public Water System Number: <i>13077</i>

WATER COMPANY PLANT DESCRIPTION (CONTINUED)

MAINS

Size (in inches)	Material	Length (in feet)
2		
3		
4		
5		
6		
8		
10		
12		

CUSTOMER METERS

Size (in inches)	Quantity
5/8 X 3/4	<i>94</i>
3/4	
1	
1 1/2	
2	<i>/</i>
Comp. 3	
Turbo 3	
Comp. 4	
Turbo 4	
Comp. 6	
Turbo 6	

For the following three items, list the utility owned assets in each category for each system.

TREATMENT EQUIPMENT:

STRUCTURES:

OTHER:

Note: If you are filing for more than one system, please provide separate sheets for each system.

JK

COMPANY NAME	<i>Arthur Water Co, Inc</i>	
Name of System:	<i>Blue Hills</i>	ADEQ Public Water System Number: <i>13055</i>

WATER COMPANY PLANT DESCRIPTION (CONTINUED)

MAINS

Size (in inches)	Material	Length (in feet)
2		
3		
4		
5		
6		
8		
10		
12		

CUSTOMER METERS

Size (in inches)	Quantity
5/8 X 3/4	<i>54</i>
3/4	
1	
1 1/2	
2	
Comp. 3	
Turbo 3	
Comp. 4	
Turbo 4	
Comp. 6	
Turbo 6	

For the following three items, list the utility owned assets in each category for each system.

TREATMENT EQUIPMENT:

STRUCTURES:

OTHER:

Note: If you are filing for more than one system, please provide separate sheets for each system.

COMPANY NAME	<i>W. H. Hart Water Co., Inc.</i>	
Name of System:	<i>Turkey Creek Meadows</i>	ADEQ Public Water System Number: <i>13056</i>

WATER COMPANY PLANT DESCRIPTION (CONTINUED)

MAINS		
Size (in inches)	Material	Length (in feet)
2		
3		
4		
5		
6		
8		
10		
12		

CUSTOMER METERS	
Size (in inches)	Quantity
5/8 X 3/4	<i>125.</i>
3/4	
1	
1 1/2	
2	
Comp. 3	
Turbo 3	
Comp. 4	
Turbo 4	
Comp. 6	
Turbo 6	

For the following three items, list the utility owned assets in each category for each system.

TREATMENT EQUIPMENT:

STRUCTURES:

OTHER:

Note: If you are filing for more than one system, please provide separate sheets for each system.

COMPANY NAME:	<u>Willett Water Co, Inc</u>	
Name of System:	<u>Harbor Estates</u>	ADEQ Public Water System Number: <u>13077</u>

WATER USE DATA SHEET BY MONTH FOR CALENDAR YEAR 2009

MONTH	NUMBER OF CUSTOMERS	GALLONS SOLD (Thousands)	GALLONS PUMPED (Thousands)	GALLONS PURCHASED (Thousands)
JANUARY	95	543740		543740
FEBRUARY	95	477220		477220
MARCH	95	581640		581640
APRIL	95	695790		695790
MAY	95	705580		705580
JUNE	95	820100		820100
JULY	95	886380		886380
AUGUST	95	940760		940760
SEPTEMBER	95	862440		862440
OCTOBER	95	756220		756220
NOVEMBER	95	560920		560920
DECEMBER	95	544540		544540
TOTALS →		8344980		8344980

What is the level of arsenic for each well on your system? in excess of MCL mg/l
(If more than one well, please list each separately.)

If system has fire hydrants, what is the fire flow requirement? N/A GPM for ____ hrs

If system has chlorination treatment, does this treatment system chlorinate continuously?
☒ Yes () No

Is the Water Utility located in an ADWR Active Management Area (AMA)?
☒ Yes () No

Does the Company have an ADWR Gallons Per Capita Per Day (GPCPD) requirement?
() Yes ☒ No

If yes, provide the GPCPD amount: N/A

Note: If you are filing for more than one system, please provide separate data sheets for each system.

COMPANY NAME:	<u>Wichita Water Co, Inc</u>	
Name of System:	<u>Blue Hills</u>	ADEQ Public Water System Number: <u>13055</u>

WATER USE DATA SHEET BY MONTH FOR CALENDAR YEAR 2009

MONTH	NUMBER OF CUSTOMERS	GALLONS SOLD (Thousands)	GALLONS PUMPED (Thousands)	GALLONS PURCHASED (Thousands)
JANUARY	<u>54</u>	<u>245400</u>	<u>245400</u>	
FEBRUARY	<u>54</u>	<u>249750</u>	<u>249750</u>	
MARCH	<u>54</u>	<u>189380</u>	<u>189380</u>	
APRIL	<u>54</u>	<u>296800</u>	<u>296800</u>	
MAY	<u>54</u>	<u>244730</u>	<u>244730</u>	
JUNE	<u>54</u>	<u>360560</u>	<u>360560</u>	
JULY	<u>54</u>	<u>302790</u>	<u>302790</u>	
AUGUST	<u>54</u>	<u>409310</u>	<u>409310</u>	
SEPTEMBER	<u>54</u>	<u>422310</u>	<u>422310</u>	
OCTOBER	<u>54</u>	<u>264610</u>	<u>264610</u>	
NOVEMBER	<u>54</u>	<u>619070</u>	<u>619070</u>	
DECEMBER	<u>51</u>	<u>248180</u>	<u>248180</u>	
TOTALS →		<u>3812980</u>	<u>3812980</u>	

What is the level of arsenic for each well on your system? 18 mg/l
(If more than one well, please list each separately.)

If system has fire hydrants, what is the fire flow requirement? N/A GPM for ___ hrs

If system has chlorination treatment, does this treatment system chlorinate continuously?
☒ Yes () No

Is the Water Utility located in an ADWR Active Management Area (AMA)?
☒ Yes () No

Does the Company have an ADWR Gallons Per Capita Per Day (GPCPD) requirement?
() Yes ☒ No

If yes, provide the GPCPD amount: N/A

Note: If you are filing for more than one system, please provide separate data sheets for each system.

COMPANY NAME: <u>Wilford Water Co, Inc.</u>
Name of System: <u>Thurston Nevada</u> ADEQ Public Water System Number: <u>13056</u>

WATER USE DATA SHEET BY MONTH FOR CALENDAR YEAR 2009

MONTH	NUMBER OF CUSTOMERS	GALLONS SOLD (Thousands)	GALLONS PUMPED (Thousands)	GALLONS PURCHASED (Thousands)
JANUARY	<u>125</u>	<u>439280</u>	<u>81980</u>	<u>357300</u>
FEBRUARY	<u>123</u>	<u>449400</u>	<u>15900</u>	<u>433500</u>
MARCH	<u>124</u>	<u>451780</u>	<u>101480</u>	<u>350300</u>
APRIL	<u>124</u>	<u>506900</u>	<u>190800</u>	<u>316100</u>
MAY	<u>125</u>	<u>505180</u>	<u>158480</u>	<u>346700</u>
JUNE	<u>123</u>	<u>811960</u>	<u>554760</u>	<u>257200</u>
JULY	<u>123</u>	<u>713150</u>	<u>299250</u>	<u>413900</u>
AUGUST	<u>123</u>	<u>894700</u>	<u>501840</u>	<u>392900</u>
SEPTEMBER	<u>124</u>	<u>845770</u>	<u>425670</u>	<u>420100</u>
OCTOBER	<u>124</u>	<u>626870</u>	<u>470690</u>	<u>156200</u>
NOVEMBER	<u>123</u>	<u>700080</u>	<u>399180</u>	<u>300900</u>
DECEMBER	<u>124</u>	<u>548370</u>	<u>330170</u>	<u>218200</u>
TOTALS →		<u>7493500</u>	<u>3530200</u>	<u>3963300</u>

What is the level of arsenic for each well on your system? 6. mg/l
(If more than one well, please list each separately.)

If system has fire hydrants, what is the fire flow requirement? N/A GPM for hrs

If system has chlorination treatment, does this treatment system chlorinate continuously?
() Yes (X) No

Is the Water Utility located in an ADWR Active Management Area (AMA)?
() Yes (X) No

Does the Company have an ADWR Gallons Per Capita Per Day (GPCPD) requirement?
() Yes (X) No

If yes, provide the GPCPD amount: N/A

Note: If you are filing for more than one system, please provide separate data sheets for each system.

COMPANY NAME:	Willmont Water Co, Inc	
Name of System:	Yonkers & State	ADEQ Public Water System Number: 13077

UTILITY SHUTOFFS / DISCONNECTS

MONTH	Termination without Notice R14-2-410.B	Termination with Notice R14-2-410.C	OTHER
JANUARY			
FEBRUARY			
MARCH			
APRIL			
MAY			
JUNE			
JULY			
AUGUST			
SEPTEMBER			
OCTOBER			
NOVEMBER			
DECEMBER			
TOTALS →	0	0	0

OTHER (description):

COMPANY NAME:	Pinehill Water Co, Inc	
Name of System:	Pinehill	ADEQ Public Water System Number: 13055

UTILITY SHUTOFFS / DISCONNECTS

MONTH	Termination without Notice R14-2-410.B	Termination with Notice R14-2-410.C	OTHER
JANUARY			
FEBRUARY			
MARCH			
APRIL			
MAY			
JUNE			
JULY			
AUGUST			
SEPTEMBER			
OCTOBER			
NOVEMBER			
DECEMBER			
TOTALS →	0	0	0

OTHER (description):

COMPANY NAME:	<i>Wilhoit Water Co Inc.</i>
Name of System:	<i>Theriot Water</i> SADEQ Public Water System Number: <i>13056</i>

UTILITY SHUTOFFS / DISCONNECTS

MONTH	Termination without Notice R14-2-410.B	Termination with Notice R14-2-410.C	OTHER
JANUARY			
FEBRUARY			
MARCH			
APRIL			
MAY			
JUNE		<i>1</i>	
JULY			
AUGUST			
SEPTEMBER			
OCTOBER			
NOVEMBER			
DECEMBER			
TOTALS →	<i>0</i>	<i>1</i>	<i>0</i>

OTHER (description):

COMPANY NAME Wilbur Porter Co, Inc YEAR ENDING 12/31/2009

PROPERTY TAXES

Amount of actual property taxes paid during Calendar Year 2009 was: \$ 7,281.62

Attach to this annual report proof (e.g. property tax bills stamped "paid in full" or copies of cancelled checks for property tax payments) of any and all property taxes paid during the calendar year.

If no property taxes paid, explain why. _____

**VERIFICATION
AND
SWORN STATEMENT**
Taxes

RECEIVED
FEB 2 2010
ACC UTILITIES DIRECTOR

VERIFICATION

STATE OF Arizona
I, THE UNDERSIGNED
OF THE

COUNTY OF (COUNTY NAME) <u>Yavapai</u>
NAME (OWNER OR OFFICIAL) <u>David A. Corlin Jr.</u>
COMPANY NAME <u>Wilbert Water Co. Inc.</u>

DO SAY THAT THIS ANNUAL UTILITY PROPERTY TAX AND SALES TAX REPORT TO THE ARIZONA CORPORATION COMMISSION

FOR THE YEAR ENDING

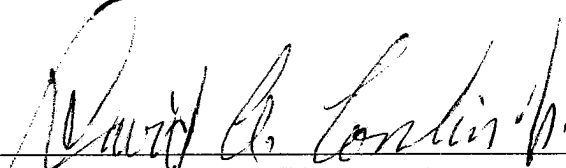
MONTH	DAY	YEAR
12	31	2009

HAS BEEN PREPARED UNDER MY DIRECTION, FROM THE ORIGINAL BOOKS, PAPERS AND RECORDS OF SAID UTILITY; THAT I HAVE CAREFULLY EXAMINED THE SAME, AND DECLARE THE SAME TO BE A COMPLETE AND CORRECT STATEMENT OF BUSINESS AND AFFAIRS OF SAID UTILITY FOR THE PERIOD COVERED BY THIS REPORT IN RESPECT TO EACH AND EVERY MATTER AND THING SET FORTH, TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

SWORN STATEMENT

I HEREBY ATTEST THAT ALL PROPERTY TAXES FOR SAID COMPANY ARE CURRENT AND PAID IN FULL.

I HEREBY ATTEST THAT ALL SALES TAXES FOR SAID COMPANY ARE CURRENT AND PAID IN FULL.



SIGNATURE OF OWNER OR OFFICIAL
(928) 639-1308

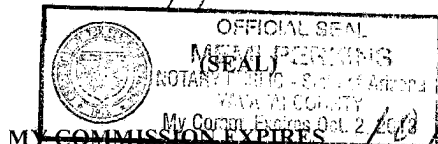
TELEPHONE NUMBER

SUBSCRIBED AND SWORN TO BEFORE ME

A NOTARY PUBLIC IN AND FOR THE COUNTY OF

THIS 14th DAY OF

COUNTY NAME <u>Yavapai</u>	
MONTH <u>April</u>	20 <u>10</u>



MY COMMISSION EXPIRES

SIGNATURE OF NOTARY PUBLIC

COMPANY NAME Willmont Water Co, Inc. YEAR ENDING 12/31/2009

INCOME TAXES

For this reporting period, provide the following:

Federal Taxable Income Reported 0
Estimated or Actual Federal Tax Liability 0

State Taxable Income Reported 0
Estimated or Actual State Tax Liability 0

Amount of Grossed-Up Contributions/Advances:

Amount of Contributions/Advances 0
Amount of Gross-Up Tax Collected 0
Total Grossed-Up Contributions/Advances 0

Decision No. 55774 states, in part, that the utility will refund any excess gross-up funds collected at the close of the tax year when tax returns are completed. Pursuant to this Decision, if gross-up tax refunds are due to any Payer or if any gross-up tax refunds have already been made, attach the following information by Payer: name and amount of contribution/advance, the amount of gross-up tax collected, the amount of refund due to each Payer, and the date the Utility expects to make or has made the refund to the Payer.

CERTIFICATION

The undersigned hereby certifies that the Utility has refunded to Payers all gross-up tax refunds reported in the prior year's annual report. This certification is to be signed by the President or Chief Executive Officer, if a corporation; the managing general partner, if a partnership; the managing member, if a limited liability company or the sole proprietor, if a sole proprietorship.

David A. Corlin, Jr.
SIGNATURE

4/14/2010
DATE

David A Corlin, Jr.
PRINTED NAME

President
TITLE

**VERIFICATION
AND
SWORN STATEMENT**
Intrastate Revenues Only

RECEIVED

ACC UTILITIES DIRECTOR

VERIFICATION

STATE OF Arizona
I, THE UNDERSIGNED
OF THE

COUNTY OF (COUNTY NAME)	<u>Yavapai</u>
NAME (OWNER OR OFFICIAL) TITLE	<u>David A. Conlin, Jr.</u>
COMPANY NAME	<u>Wilbur Water Co., Inc.</u>

DO SAY THAT THIS ANNUAL UTILITY REPORT TO THE ARIZONA CORPORATION COMMISSION

FOR THE YEAR ENDING

MONTH	DAY	YEAR
<u>12</u>	<u>31</u>	<u>2009</u>

HAS BEEN PREPARED UNDER MY DIRECTION, FROM THE ORIGINAL BOOKS, PAPERS AND RECORDS OF SAID UTILITY; THAT I HAVE CAREFULLY EXAMINED THE SAME, AND DECLARE THE SAME TO BE A COMPLETE AND CORRECT STATEMENT OF BUSINESS AND AFFAIRS OF SAID UTILITY FOR THE PERIOD COVERED BY THIS REPORT IN RESPECT TO EACH AND EVERY MATTER AND THING SET FORTH, TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

SWORN STATEMENT

IN ACCORDANCE WITH THE REQUIREMENT OF TITLE 40, ARTICLE 8, SECTION 40-401, ARIZONA REVISED STATUTES, IT IS HEREIN REPORTED THAT THE GROSS OPERATING REVENUE OF SAID UTILITY DERIVED FROM ARIZONA INTRASTATE UTILITY OPERATIONS DURING CALENDAR YEAR 2009 WAS:

Arizona Intrastate Gross Operating Revenues Only (\$)

\$ 131,096.88

(THE AMOUNT IN BOX ABOVE
INCLUDES \$ 7586.30.
IN SALES TAXES BILLED, OR COLLECTED)

****REVENUE REPORTED ON THIS PAGE MUST
INCLUDE SALES TAXES BILLED OR
COLLECTED. IF FOR ANY OTHER REASON,
THE REVENUE REPORTED ABOVE DOES NOT
AGREE WITH TOTAL OPERATING REVENUES
ELSEWHERE REPORTED, ATTACH THOSE
STATEMENTS THAT RECONCILE THE
DIFFERENCE. (EXPLAIN IN DETAIL)**

David A. Conlin, Jr.
SIGNATURE OF OWNER OR OFFICIAL
(928) 639-1308
TELEPHONE NUMBER

SUBSCRIBED AND SWORN TO BEFORE ME

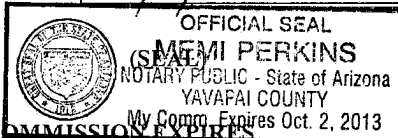
A NOTARY PUBLIC IN AND FOR THE COUNTY OF

THIS

14th

DAY OF

COUNTY NAME	<u>Yavapai</u>
MONTH	<u>April</u> 20 <u>10</u>



MY COMMISSION EXPIRES

SIGNATURE OF NOTARY PUBLIC

**VERIFICATION
AND
SWORN STATEMENT
RESIDENTIAL REVENUE**
Intrastate Revenues Only

RECEIVED
APR 14 2010
ACC UTILITIES DIRECTOR

VERIFICATION

STATE OF ARIZONA

I, THE UNDERSIGNED

OF THE

COUNTY OF (COUNTY NAME)	Yavapai	
NAME (OWNER OR OFFICIAL)	Don A. Conlin	TITLE President
COMPANY NAME	Wilhoit Water Co, Inc.	

DO SAY THAT THIS ANNUAL UTILITY REPORT TO THE ARIZONA CORPORATION COMMISSION

FOR THE YEAR ENDING

MONTH	DAY	YEAR
12	31	2009

HAS BEEN PREPARED UNDER MY DIRECTION, FROM THE ORIGINAL BOOKS, PAPERS AND RECORDS OF SAID UTILITY; THAT I HAVE CAREFULLY EXAMINED THE SAME, AND DECLARE THE SAME TO BE A COMPLETE AND CORRECT STATEMENT OF BUSINESS AND AFFAIRS OF SAID UTILITY FOR THE PERIOD COVERED BY THIS REPORT IN RESPECT TO EACH AND EVERY MATTER AND THING SET FORTH, TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

SWORN STATEMENT

IN ACCORDANCE WITH THE REQUIREMENTS OF TITLE 40, ARTICLE 8, SECTION 40-401.01, ARIZONA REVISED STATUTES, IT IS HEREIN REPORTED THAT THE GROSS OPERATING REVENUE OF SAID UTILITY DERIVED FROM ARIZONA INTRASTATE UTILITY OPERATIONS RECEIVED FROM RESIDENTIAL CUSTOMERS DURING CALENDAR YEAR 2009 WAS:

ARIZONA INTRASTATE GROSS OPERATING REVENUES
\$ 131096.88

THE AMOUNT IN BOX AT LEFT
INCLUDES \$ 7586.30.
IN SALES TAXES BILLED, OR COLLECTED,

*RESIDENTIAL REVENUE REPORTED ON THIS PAGE
MUST INCLUDE SALES TAXES BILLED.

Don A. Conlin
SIGNATURE OF OWNER OR OFFICIAL
(928) 639-1308
TELEPHONE NUMBER

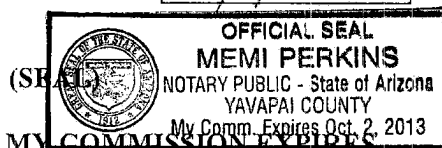
SUBSCRIBED AND SWORN TO BEFORE ME

A NOTARY PUBLIC IN AND FOR THE COUNTY OF

THIS

14th

DAY OF



NOTARY PUBLIC NAME	
COUNTY NAME	
MONTH April	20 10

Memi Perkins
SIGNATURE OF NOTARY PUBLIC